MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

SERIAL NO. 10/540432 APPLICANTIS)

FILING DATE

-7

CLAIMS															
		AS FILED		AFTER 1"AMERIDMENT		AFTER 3 MANEHOMENT			AS	AS FILED		AFTER 1 AMENDMENT		AFTER	
-	IND	. DEI	IND.	DEP.	IND.	DEP.]		IND.	DEP.	IND.		1"AME	NDMENT	
2				-}	ļ		1.	51			HID.	DEP.	IND.	DEP.	
3	17	·		 	 	 		52		<u> </u>		<u> </u>	-		
5						1	1	53 54		ļ				 	
6		- 	-				1.	55	- 	 					
7	17			 		ļ		56		.,	-				
8	-	1		 		 	ł	<u>57</u> 58		· ·					
9		-			-		1.	59	- -					<u> </u>	
11	 	-	-		<u> </u>	·		60							
12			·					61			- ;				
13	-	-						62 63							
15		-	-					64 -	-						
16		1	1					65							
17	-							66							
18 19	-	 	-					68	1						
20	1		 					69				[:			
21								70 71	 						
22	 							$\frac{71}{72}$	 						
24.	1	 					•	73							
25				-		·		74 75·	 						
26 27	 	 						76							
28		}						77							
29								78 79					·		
30 31	 	 						80							
32	 	 	<u> </u>	·				81					-		
33		<u> </u>						82 83							
34 35	 -				>			84	-						
36	 	 						85							
37			 					86							
38 · 39	ļ							87 88					\cdot		
40							1	89							
41					 -			90							
42							ł	91 92			-				
43							ł	93		 -			-		
45				-				. 94							
46							ŀ	95 96							
47							ŀ	9.7					-		
48 49		, ,					t	98					 		
50								99							
TOTAL IND.	4	1		T			}	100							
TOTAL PEÈ	1.5	4	l 	# F		44	ŀ	TOTAL EXD.	<u> </u>			4		1	
TOTAL CLAIMS	.9				I		F	TOTAL DEP	E	MARK!		1	111	E	
PTO - 1360	(REV. 11/04)		t Av	ailal	ole	Cor	ວັັ	CIVING	U.:	S. DEPARTM	DIT of COMI	MERCE			
-		₽ ₩		J J		•	-				i IIIIee			•	